FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Katherine Harris Secretary of State

FILED May 04, 1999 8:00 am Secretary of State 05-04-1999 90058 042 ***150.00

 Corporation 	MENT # G11713 (R INVESTMENT CO.	3			
Principal Place	e of Business	Mailing Address		1 (85((1) 466) 1)26; ((2)) (356) (3266 (1)) 416	01011 212(1 01011 21211 01011 1021
6 LAKEVIEW PL	ACE	P.O. BOX 1369			
ANNA MARIA F	L 34216	ANNA MARIA FL 34216		DO NOT MIDITE IN THE	C CDACE
US		US		DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualifed 12/03/1982	
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2238703	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State	e ,	City & State		6. Election Campaign Financing	\$5.00 May Be
23			Ó	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year in	ntangible □Yes → No
24]]25]		30]	Personal Property Tax. 10. Name and Address of New Registered	
-	9. Name and Address of Curre	nt Registered Agent	81 Name	10, Name and Address of New Registered	u Agent
ELLSWORTH, KENT C 6 LAKEVIEW PLACE ANNA MARIA FL 34216				ress (P.O. Box Number is Not Acceptable)	
			84 City	FI	85 Zip Code
office or re agent. I at SIGNATURE	to the provisions of Sections 607.05(egistered agent, or both, in the State or familiar with, and accept the obligations of th	of Florida. Such change was au ations of, Section 607.0505, Flori	thorized by the corporati	poration submits this statement for the purpose coon's board of directors. I hereby accept the appoint when reinstation.	of changing its registered pintment as registered .
12.		in and the in applicable. (NOTE.)			
	OFFICERS AT	ND DIRECTORS	13	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12 Change Addition
TITLE	PD	ND DIRECTORS	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME	PD Ellsworth, Kent C		1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS A	
TITLE NAME STREET ADDRESS	PD Ellsworth, Kent C 6 Lakeview Place		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS A	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with a address, with all other like empowered.

SIGNATURE: